

Application for Electronic Mail-in Ballot
Absent Uniformed Service Elector Serving Outside the United States

THE ELECTRONIC MAIL-IN BALLOT APPLICATION SHALL BE FILED NO LATER THAN THE CLOSE OF BUSINESS ON
THE FRIDAY IMMEDIATELY PRECEDING THE ELECTION.



To: (county fill in your address)

UOCAVA CITIZEN STATUS

- ☐ Member of Uniformed Services or Merchant Marine on Active Duty, serving outside the United States.
C.R.S. 1-8-103.5(4)

REQUIRED INFORMATION

PLEASE PROVIDE ALL REQUIRED INFORMATION TO ENSURE THAT YOUR BALLOT IS PROPERLY TRANSMITTED.

Email my electronic ballot to: _____

APO/FPO Address: _____

Last Name (Required)	First Name (Required)	Middle Initial	Suffix	Previous Name of Applicant – If Applicable		
Colorado Residential Address (Required)		Apt./Unit#	City/Town (Required)	State	Zip (Required)	County
Date of Birth (Required) ____/____/____ MM DD YYYY		Social Security Number OR Last 4 digits (Optional)		Telephone Number		

Party Affiliation: If you are currently Unaffiliated and wish to vote in a Primary Election, you must declare an affiliation with a political party. Unaffiliated voters may affiliate with a political party up to and including Primary Election Day. If you are currently affiliated with a political party and wish to change your affiliation, you must submit this change request at least 29 days prior to Election Day.

_____ or ☐ Unaffiliated

**I UNDERSTAND THAT BY RETURNING MY BALLOT BY ELECTRONIC MAIL,
I AM VOLUNTARILY WAIVING MY RIGHT TO A SECRET BALLOT.**

SIGNATURE OR MARK (Required)

X _____
Signature (Required) Date (Required)

Witness Signature (Optional)

The application for an electronic mail-in ballot shall be personally signed by the applicant; or, in case of the applicant's inability to sign, the **applicant's mark shall be witnessed** by another person.

X _____
Witness's Signature (Optional) Date